

TRINITY CATHEDRAL CHILD MEMBERSHIP FORM

INSTRUCTIONS AND PRIVACY PLEDGE

This form should be completed by the parent or guardian for all children in the family 15 years and younger. An asterisk (*) indicates information we really need to complete the membership file. The rest of the form is optional but would be useful for the ministry staff as we seek to best serve your needs and build our community of faith.

Trinity Cathedral prints and distributes to the congregation an annual membership directory that explicitly prohibits use for personal, professional or business solicitation. We also maintain a postal and e-mail list of members that we use to facilitate communication. Our weekly e-mail newsletter is sent to a separate distribution list from which one may voluntarily subscribe or unsubscribe. The content of this membership form will be used in preparing the membership directory and in planning for ministry within the congregation. Trinity Cathedral will not distribute membership information to other organizations with the exception of those who allow their names and addresses to be given to the Diocese of Ohio for purposes of receiving the Diocesan newsletter, "Church Life."

*Parent/Guardian Name: _____

*Parent/Guardian Name: _____

Child #1 *Full Name _____

Date of birth _____ School grade _____ Attend church? (circle yes or no)

*Anticipated year of high school school graduation _____

*Baptized? (yes or no) _____ If yes, please list date and place _____

*Confirmed? (yes or no) _____ If yes, please list date and place _____

Child #2 *Full Name _____

Date of birth _____ School grade _____ Attend church? (circle yes or no)

*Anticipated year of high school school graduation _____

*Baptized? (yes or no) _____ If yes, please list date and place _____

*Confirmed? (yes or no) _____ If yes, please list date and place _____

Child #3 *Full Name _____

Date of birth _____ School grade _____ Attend church? (circle yes or no)

*Anticipated year of high school school graduation _____

*Baptized? (yes or no) _____ If yes, please list date and place _____

*Confirmed? (yes or no) _____ If yes, please list date and place _____

Child #4 *Full Name _____

Date of birth _____ School grade _____ Attend church? (circle yes or no)

*Anticipated year of high school school graduation _____

*Baptized? (yes or no) _____ If yes, please list date and place _____

*Confirmed? (yes or no) _____ If yes, please list date and place _____

Child #5 *Full Name _____

Date of birth _____ School grade _____ Attend church? (circle yes or no)

*Anticipated year of high school school graduation _____

*Baptized? (yes or no) _____ If yes, please list date and place _____

*Confirmed? (yes or no) _____ If yes, please list date and place _____

Name of person completing this form _____ Date _____